(July 2000)

Political Organization Notice of Section 527 Status

OMB No. 1545-1693

Pa	t General Information		
1	Name of organization. HOWLA Shipparg for State Af Mailing address (P.O. Box or number, street, and room or s NB # 36 5 5 1000 10 4	Homey	Employer identification number 59 3660705
2	Mailing address (P.O. Box or number, street, and room or s	suite number) 4vc ± 8)	
	City of town, state, and ZIP code		
3	E-mail address of organization		
4a	Name of custodian of records 4b	Custodian's address	1
	Michelle Shimberg	DAOR	
5a	Traine or contract Figure	Contact person's address	
	Ribert Shimberg	Sanl	
6	Business address of organization (if different from mailing a	address shown above). Number, street, a	and room or suite number
	City or town, state, and ZIP code		
Pai	t II Purpose		
7	Describe the purpose of the organization		
	Condidate)		······································
Par	List of All Related Entities (see instruct		
8a	Name of related entity 8b Relationship	8c Address	
	None		
	and the second s		
	AUG 0 3 2000		
For F	Paperwork Reduction Act Notice, see page 4.	Cat. No. 30405V	Form 8871 (7-2000)

	9b Title	9c Address
Nind		
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